Joe DeNucci State Auditor

NEWS RELEASE

FOR IMMEDIATE RELEASE
SEPTEMBER 27, 2001

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DeNUCCI CITES DEFICIENCIES IN STATE'S MEDICATION ADMINISTRATION PROGRAM

State Auditor Joe DeNucci reported today that the quality of care for certain residents of community-based human service programs could be jeopardized due to weaknesses in state oversight of medication administration practices.

DeNucci, in an audit of the Commonwealth's Medication Administration Program (MAP), found that many service providers have failed to report medication errors in a timely manner or taken steps to ensure that workers who make errors are identified and properly retrained so that these errors do not recur.

The MAP program, which was introduced by the Department of Public Health in 1993, allows non-licensed persons who have met training and certification requirements to administer medication to patients in community-based residences operated by the Departments of Mental Health and Mental Retardation. Providers are required to report any medication errors or other policy violations to the appropriate agency within a seven-day period. Medication mistakes that result in patients' hospitalization must be reported within 24 hours.

DeNucci's audit found that as many as 71 percent of the providers did not notify agencies of medication errors within the required seven days, while up to 68 percent of the providers reviewed did not report errors requiring hospitalization within the required 24-hour period. One provider took 45 days to report a medication error that sent a patient to a hospital emergency room, while another provider never notified the Commonwealth of a serious medication occurrence. Furthermore, providers were not required to identify the individuals who made mistakes so that they could be properly trained to prevent future errors.

DeNucci's audit noted that there may be an inherent disincentive for organizations to report medication deficiencies since this could potentially affect the awarding of contracts to error-prone providers in the future.

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"The Department of Public Health should insist on an improved medication reporting process," said DeNucci. "All reports should be made in a timely and accurate manner and the department should consider imposing sanctions on those providers who fail to comply with this requirement."

In addition, DeNucci's audit revealed problems with the MAP program monitoring process. During the audit period, DPH had only one person assigned to review the administration of medication in approximately 250 community-based programs involving 2,441 sites. As a result, only 43 programs and 138 sites had ever been reviewed. Also, DPH did not have any written policies and procedures detailing when and how these reviews were to be conducted.

"These reviews are essential to the program's success," said DeNucci.. "All providers should undergo thorough and regular reviews so that problems may be detected and patients protected."

DeNucci's audit studied similar medication administration programs in other states and found that the MAP program training and participation requirements appear to be less comprehensive than similar programs in these states. Furthermore, officials from both the state's Board of Registration in Nursing and the Massachusetts Nurses' Association said they consider the Commonwealth's training requirements to be inadequate.

"While the establishment of the Medication Administration Program was a positive step toward improving the manner in which medication is administered, Massachusetts still needs to improve its oversight of this important program if we are to assure our consumers of safe and adequate medical care in state-funded community residences," concluded DeNucci.

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